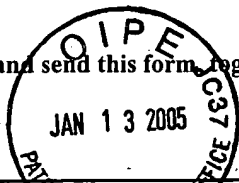


1-18-05  
PART B - FEE(S) TRANSMITTAL

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Complete and send this form, together with applicable fee(s), to: Mail

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21874 7590 10/14/2004

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Lakeisha Bryant	(Depositor's name)
<i>Lakeisha Bryant</i>	(Signature)
January 13, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/491,643	01/27/2000	Motohiro Hayashi	49378(868)	8846

TITLE OF INVENTION: IMAGE DATA TRANSMITTING APPARATUS AND IMAGE DATA RECEIVING APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	01/14/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WORKU, NEGUSSIE	2626	358-437000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Edwards & Angell, LLP  
David G. Conlin  
George W. Hartnell, III

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sharp Kabushiki Kaisha

Osaka, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-1105 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date January 13, 2005

Typed or printed name George W. Hartnell, III

Registration No. 42,639

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